

Utah Fire & Rescue Academy – Fire Department Assistance Grant Application 2009

1. Agency:		2. FDID #		Fed Employer ID #	
		DUN'S #			
3. Address:		4. City:		5. Zip Code:	
6. Contact Person:		7. Title:		8. Daytime Phone:	
9. Cellular Phone:		10. Fax:		11. Email:	
12. Group Application (Enter each additional Department's Name, FDID #, Dun's # & Fed EIN #)	Dept. Name		FDID	DUN's	Fed EIN #
13. Department Implemented NIMS?		<input type="checkbox"/> Yes <input type="checkbox"/> No		14. Participates in Utah Certification Program?	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
15. Number of certified Wildland Firefighter I:				16. Number of certified Structural Firefighter I:	
				Number of certified Structural Firefighter II:	
17. Total number of firefighters: _____ Volunteer _____ Paid on Call _____ Full-time					
18. A. Does Department have possession of FEPP Equipment?				<input type="checkbox"/> Yes <input type="checkbox"/> No	
B. If Yes, How many rolling stock items? (Vehicles, Trailers, Heavy Equipment)				_____	
19. A. Does Department participate in the State Wildland fire MOU Program?				<input type="checkbox"/> Yes <input type="checkbox"/> No	
B. Does this request include items to meet provisions of an MOU, NWCG or NFPA Standard?				<input type="checkbox"/> Yes <input type="checkbox"/> No	
20. Does Department report Fire Incidents to the Utah State Fire Marshals Office (UFIRS)?				<input type="checkbox"/> Yes <input type="checkbox"/> No	
21. Total Current Dept. operating budget:				22. Current budget allocation to training:	
23. Current budget allocation to safety/PPE:				24. Current budget allocation to equipment:	
25. How will Dept. provide matching portion? <input type="checkbox"/> In-Kind Services <input type="checkbox"/> Dept. Budget <input type="checkbox"/> Donated Labor/Funds					
26. If not selected to receive a 10% match grant, do you want to be considered for a 50% matching grant?				<input type="checkbox"/> Yes <input type="checkbox"/> No	
27. A. Excluding mutual aid, will this request develop resources to be shared by more than one department?				<input type="checkbox"/> Yes <input type="checkbox"/> No	
B. If Yes, which other departments are affected?					
28. A. Will your proposal extend fire protection to additional population and/or area beyond current services?				<input type="checkbox"/> Yes <input type="checkbox"/> No	
B. If Yes, how much new population will be served?					
C. If Yes, approximately how much new area?					
29. Does the Department serve a rural population? (Refer to application instructions for assistance in selection of appropriate category) Check only One:				<input type="checkbox"/> Category 1 <input type="checkbox"/> Category 2 <input type="checkbox"/> Category 3 <input type="checkbox"/> Category 4 <input type="checkbox"/> Category 5 (if category 5 is checked proceed to section II)	

Section I

Category 1,2,3 & 4 complete this section.

30. Do you assist a Department of Interior (DOI) agency with wildland fire suppression? DOI agencies include the Bureau of Land Management, the U.S. Fish and Wildlife Service and the U.S. Park Service. Check the categories that apply.					
<input type="checkbox"/> Border DOI lands <input type="checkbox"/> DOI administered lands within jurisdictional response <input type="checkbox"/> Respond to DOI agency Fires					
31. Will your proposal benefit a DOI agency in providing fire suppression response?				<input type="checkbox"/> Yes <input type="checkbox"/> No	
How?					
32. Is this project for an Indian Tribal Community, including those on State or Federal Reservations?				<input type="checkbox"/> Yes <input type="checkbox"/> No	
33. Total wildfire responses in 2008:		34. Wildfire responses in primary area to DOI lands 2008:			
		Wildfire responses in primary area to Dept of AG lands 2008:			
35. Total all incident responses in 2008:		36. Wildfire responses to DOI lands outside primary area 2008:			
		Wildfire responses to Dept of AG lands outside primary area 2008:			
37. Number of estimated wildland urban intermix acres protected by department in primary response area:					
38. A. Does department currently have full approved (NWCG)* wildland personal protective equipment (PPE) for all members?				<input type="checkbox"/> Yes <input type="checkbox"/> No	
B. If no, does this application request PPE?				<input type="checkbox"/> Yes <input type="checkbox"/> No	
C. If no, how many members are equipped with approved PPE?					

	D. Does department currently have full approved (NFPA current standard)* structural personal protective equipment (PPE) for all members?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	E. If no, does this application request PPE?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	F. If no, how many members are equipped with approved PPE? <i>* Refer to application instructions for definition of full PPE</i>	
	G. If your department includes members who have not been trained and certified, does this application request assistance for training and/or certification?	<input type="checkbox"/> Yes <input type="checkbox"/> No
39.	Indicate the number and type of advanced wildland F.F. qualifications in Department:	
40.	Does department have interoperable radio communications for all supervisory personnel and in all apparatuses If no, what are your radio communication needs? ** Refer to radio spec sheet for DOI funds **	<input type="checkbox"/> Yes <input type="checkbox"/> No
41.	A. Did you receive a grant from this program last year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	B. If so, did you complete the projects/purchases that were funded?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Section II**Fire Prevention**

Describe your departments fire prevention request

42.	Describe details of project:
	Structure (100 words or less):
	Wildland (100 words or less):

43.	How will project improve/extend existing conditions or circumstances:
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44.	Itemized Grant Request Include materials, equipment, books, per-diem, lodging, mileage, etc.
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	Wildland				Structure			
	Description	Quantity	Cost	Total	Description	Quantity	Cost	Total
1				0.00				0.00
2				0.00				0.00
3				0.00				0.00
4				0.00				0.00
5				0.00				0.00
6				0.00				0.00
7				0.00				0.00
8				0.00				0.00
9				0.00				0.00
10				0.00				0.00
11				0.00				0.00
12				0.00				0.00
13				0.00				0.00
14				0.00				0.00
		Total Wildland		\$ 0.00		Total Structure		\$ 0.00
Total Fire Prevention Request								\$ 0.00

45. Prepared by: (Please Print)		Title:	
Signature:		Date:	

Section II cont.

Training

Describe your departments training request.

46.	Describe details of project:
	Structure (100 words or less):
	Wildland (100 words or less):

47.	How will project improve/extend existing conditions or circumstances:

48.

Itemized Grant Request								
Include materials, equipment, tuition, books, per-diem, lodging, mileage, etc.								
	Wildland				Structure			
	Description	Quantity	Cost	Total	Description	Quantity	Cost	Total
1				0.00				0.00
2				0.00				0.00
3				0.00				0.00
4				0.00				0.00
5				0.00				0.00
6				0.00				0.00
7				0.00				0.00
8				0.00				0.00
9				0.00				0.00
10				0.00				0.00
11				0.00				0.00
12				0.00				0.00
13				0.00				0.00
14				0.00				0.00
		Total Wildland		\$ 0.00		Total Structure		\$ 0.00
Total Training Request								\$ 0.00

49. Prepared by: (Please Print)		Title:
Signature:		Date:

Section II cont.

Fire Equipment and Apparatus

Describe your departments Fire Equipment and Apparatus request. Indicate if the equipment is wildland or structural.

50.	Describe details of project:
	Structure (100 words or less):
	Wildland (100 words or less):

51.	How will project improve/extend existing conditions or circumstances:

52. Itemized Grant Request								
Include PPE, communications, tools, equipment, materials, supplies, etc.								
	Wildland				Structure			
	Description	Quantity	Cost	Total	Description	Quantity	Cost	Total
1				0.00				0.00
2				0.00				0.00
3				0.00				0.00
4				0.00				0.00
5				0.00				0.00
6				0.00				0.00
7				0.00				0.00
8				0.00				0.00
9				0.00				0.00
10				0.00				0.00
11				0.00				0.00
12				0.00				0.00
13				0.00				0.00
14				0.00				0.00
		Total Wildland		\$ 0.00		Total Structure		\$ 0.00
Total Equipment Request								\$ 0.00
Total Grant Request								\$ 0.00

53. Prepared by: (Please Print)		Title:
Signature:		Date: